### CHALKER FLORES, LLP

### INTELLECTUAL PROPERTY LAW

### Fax

## RECEIVED CENTRAL FAX CENTER

DATE: November 6, 2005

NOV 0 6 2005

ТО	Box / Fax No.		RE:	
US Patent and Trademark Office	571-273-8300		Serial No. Filing Date: · Inventor:	09/741,616 12/19/00 John et al.
FROM	Daniel J. Chalker	dchalker@chalkerflores.com		
DIRECT LINE	214-866-0001			
DIRECT FAX	214-866-0010			
CLIENT/MATTER NO.	UTAU:1100			
TOTAL PAGES (including cover)	19			
Customer No.	34,725			

If you have any problems with this transmission, please call 214-866-0001.

Is this for Service of Documents? Please indicate local time deadline: Confirmation Requested:

#### Comments

#### Attached for filing please find:

1.	Request for RCE Transmittal	- 1 pg.
2.	Petition for One (1) Month Extension	- 1 pg.
3.	PTO Fee Transmittal	- 1 pg.
4.	PTO Form 2038	- 1 pg.
5.	Response to Final Office Action of July 5, 2005	- 14 pgs.

Thank you,

Daniel J. Chalker, Reg. No. 40,552

Confidentiality Note: The documents accompanying this facsimile contain information from Edwin Flores, which is confidential. The information is intended only for the use of the individual or entity named on this transmission sheet. If you are not the intended recipient, you are hereby notified that any disclosure, copying distribution or the taking of any action in reliance on the contents of this facsimile is strictly prohibited, and that the documents should be returned to Edwin Flores immediately. If you have received this facsimile in error, please notify us by telephone immediately so that we can arrange for the return of the original document in us at no cost to you.

# RECEIVED CENTRAL FAX CENTER

NOV 0.6 2005

LUUJ PTO/SB/17 (12-04v2)

Approved for use through 07/31/2008, OMB 0651-0032
U.S. Potent and Technology

			d in res	mond to a collection	वाज । । स्वर्धाः १ ताँ विद्यालया	an unleas il disnit	PEPARTMENT OF COMME Bys a valid OMB control our	
En Fees oursyant to the Cons	fective on 12/08/ Olidaled Appropri	2004. Setiona Act. 2005 (H.R. 48	318)		Co	mplete if Kno	7W77	
				Application Num	iber 09	/741,616		
FEE TRANSMITTAL For FY 2005				Filing Date	12	12/19/2000		
				First Named Inve	entor Ja	John et al.		
✓ Applicant claims sn	utata vilina ilar	s. See 37 CFR 1 27	_[	Examiner Name	Da	niel H. Pan		
		<del> </del>	L	Art Unit	21	2158		
TOTAL AMOUNT OF PA	AYMENT (\$	1,005.00		Attorney Docket	No. UT	AU:1100		
METHOD OF PAYME	NT (check a	il that apply)						
Check Cred	it Card	Money Order	None	Other (n	lesse identif	5.).•		
Deposit Account	_			Deposit Ac				
		account, the Director is					* · · · · · · · · · · · · · · · · · · ·	
<del></del>	(s) indicated b		o vicit					
		e(s) or underpayments	at 1				xcept for the filing fee	
i under 37 C	FR 1 18 and 1	17			any overpe			
VARNING: Information on t Information and authorizati	ਸ਼ੀ8 form may b on on PTO-2036	ecome public. Credit ca: t.	rd infor	on bluode nottam	t be includa	d on this form. I	Provide credit card	
FEE CALCULATION		······································						
. BASIC FILING, SE	ARCH, AND	EXAMINATION FE	ES					
,	FILING	FEES \$1	EARC	H FEES	<b>EXAMIN</b>	ATION FEES		
Application Type	Fég.(\$)	<u>Small Entity</u> <u>Fee (\$)                                    </u>	29 (\$)	Small Entity	Fee (\$)	Small Entity	Foos Paid (\$)	
Utility	300		00	Eee_(\$) 250	200	<u>Fee (\$)</u> 100	7 000 1 am (4)	
Design	200		00		130		<del></del>	
Plant	200	• • • • • • • • • • • • • • • • • • • •	00	50		65		
Reissue	300			150	160	80		
Provisional	200		00	250	600	300		
. EXCESS CLAIM FI		100	0	0	0	0	<u></u>	
Fee Description						Fee (\$)	<u>Small Entity</u> Fee (\$)	
Each claim over 20	(including R	cissues)				50	25	
Each independent of	laim over 3 (	including Reissues)	)			200	100	
Multiple dependent						360	180	
<u>Total Claims</u> 38 - 20 or HP =	Extra Clain			ald (S)			spendent Claims	
HP = highest number of to		X <u>25</u> = .	<u>545</u> (	0.00_		<u>Fee (\$)</u>	Fee Paid (\$)	
ndep. Claims	Extra Clain	ne Fee (\$)	Foe P	ald (\$)				
43 or HP =	1	x 100 =	\$100	0.00				
HP = highest number of ind	ependent daima	peld for, if greater then 3,	١.	_				
APPLICATION SIZE of the specification an	: FEE d drawings e	xceed 100 sheets of	fnance	r (excluding al	entronical	lu filed essue	man as an entitle	
listings under 37 (	CFR 1.52(e))	the application size	e fee r	due is \$250 (\$1	25 for em	iy meu seque all entity) for	each additional SD	
Sheets or fraction t	thereof. See	35 U.S.C. 41(a)(1)(	G) an	d 37 CFR 1.16	69).	an enary) io	Cach additional 50	
Total Sheets - 100 =	Extra Snee	ts <u>Number of</u> /50 =	each (	<u>additional 50 or</u>	fraction #	ereof <u>Fee</u>	(\$) Fee Paid (\$)	
OTHER FEE(S)			(	round up to a wh	iole numbę	r) ×	=	
	ication. \$1.	30 fee (no small ent	ity dis	scount)			Fees Paid (\$	
		: RCE (\$395); One Mo				•	\$455.00	
MITTED BY								
nature /	9/1	1 A	. Re	gistration No.		Talanha	19 044 000 000	
ne (Print/Type) Daniel J.	2) / / <u>/ / / / / / / / / / / / / / / / /</u>		(Att	tomey/Agent) 40,	352		ne 214-866-0001	
e (FILITY I YIDEN DANIAL J.	Chalker					Date 11/	mems	

This collection of information is required by 37 CFR 1.135. The information is required to obtain or retain a benefit by the public which is to file (and by the USFTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USFTO. Time will vary depending upon the individual case. Any comments on the emount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1460. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1460.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.